

Maine Childhood Lead Poisoning Prevention Program (MCLPPP) Recommended Clinical Management of Elevated Blood Lead Levels

All capillary results ≥ 10 $\mu\text{g/dl}$ should be confirmed with a venous specimen as soon as possible

FOLLOW-UP BLOOD LEAD TESTING

Venous blood lead level	Action	Routine follow-up (first 2-4 tests after identification)	Additional Laboratory work	Long term follow-up (after BLL begins to decline)
< 10 $\mu\text{g/dl}$	<ul style="list-style-type: none"> No Intervention required 	Routine Screenings		
10-14 $\mu\text{g/dl}$	<ul style="list-style-type: none"> MCLPPP will mail educational materials to parents 	3 Months		6-9 months
15-19 $\mu\text{g/dl}$	<ul style="list-style-type: none"> MCLPPP will mail educational materials to parents MCLPPP will refer to Public Health Nurse for home visit 	2 months		3-6 months
≥ 20 $\mu\text{g/dl}$	<ul style="list-style-type: none"> MCLPPP will refer to Public Health Nurse for home visit MCLPPP will conduct environmental investigation in the home Primary healthcare provider should conduct medical, developmental and nutritional assessment 	1 month	CBC ZPP	1-3 months
≥ 45 $\mu\text{g/dl}$	<ul style="list-style-type: none"> Lead Chelation Therapy indicated Call MCLPPP for referral to Lead Poisoning Medical Consultant MCLPPP interventions & referrals as above 	Immediately	CBC ZPP G6PD Iron Studies	Chelation with subsequent follow-up

This is a suggested basic course of management, not a mandated protocol. It is recommended that treatment guidelines be used in conjunction with consultation with physicians experienced in treating childhood lead poisoning.

For more information, contact:

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